

For your



Commonwealth of Massachusetts
Group Insurance Commission

Your
Benefits
Connection

BENEFIT

Published quarterly by the GROUP INSURANCE COMMISSION for active and retired employees of the Commonwealth of Massachusetts

Mitt Romney, Governor

Robert W. Hungate, Chair

Dolores L. Mitchell, Executive Director

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GROUP INSURANCE COMMISSION

*Providing Massachusetts State
Employees, Retirees, and Their
Dependents with Access to
Quality Care at
Reasonable Costs*

Hot News for Cold Weather Active Employees' Premiums to Decrease

In accordance with the terms of the Appropriation Act for FY06, most active employees will see their basic life and health insurance premiums decrease effective January 1, 2006. Because premiums are deducted in the previous month before they are effective, you will see a take home pay increase in your December paycheck:

- ◆ Employees hired after June 30, 2003 will pay 20%, down from 25%
- ◆ Employees hired on or before June 30, 2003 with an annual salary of \$35,000 or more will pay 15%, down from 20%

Premiums for other employees, retirees and survivors will remain unchanged.

Stretch Your Paycheck HCSA and DCAP Open Enrollment October 11 - November 10



Employees trying to make their paychecks go further should take advantage of the GIC's Pre-Tax Flexible Spending Account Programs, administered by Sentinel Benefits. From October 11 through November 10, employees can enroll in the Health Care Spending Account (HCSA) and Dependent Care Assistance Program (DCAP) for benefits effective January 1, 2006. Set aside a portion of your paycheck to pay for eligible expenses. Your election(s) will be deducted from your paycheck on a pre-tax basis, which will reduce your federal and state taxes. Depending on your tax bracket, you can save approximately \$250 in taxes for every \$1,000 that you contribute.

HCSA: Pay for out-of-pocket health care expenses with pre-tax dollars. Examples of eligible out-of-pocket expenses include physician office visit co-pays,

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Medicare Part D and Your Prescription Drug Benefits

Throughout the fall, the federal government, various health plans, and other organizations will be sending information and forms to the homes of Medicare beneficiaries about the new Medicare prescription drug program known as Medicare Part D. The federal government is sponsoring, through regional and nationally-based organizations, a variety of Part D prescription drug plans. Coverage will be effective January 1, 2006. These programs are primarily designed for people who, **unlike GIC members**, do not currently have drug coverage.

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Stretch Your Paycheck HCSA and DCAP Open Enrollment October 11 - November 10

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prescription drug co-pays, health plan deductibles and coinsurance, most over-the-counter drugs, and orthodontia, contacts and eyeglasses.

DCAP: Pay on a pre-tax basis for qualified dependent care expenses, such as child care, day camp, after school programs and adult dependent day care that enable you or your spouse to work, seek employment, or attend school full-time.

Eligibility, Election Amounts and Administrative Fee

All state employees who are eligible for health benefits with the GIC are eligible for HCSA. For HCSA, you may set aside from \$500 up to the **new maximum amount** of \$2,500 annually. Active state employees who work half-time or more and have employment-related expenses for a dependent child under the age of 13 and/or a disabled adult dependent are eligible for DCAP. You may elect an annual DCAP payroll election of up to \$5,000.

The elections you select will be deducted from your paycheck on a pre-tax basis and deposited into your HCSA or DCAP account. Then you either submit receipts for eligible expenses to Sentinel Benefits for reimbursement, or use the SmartFlex card, described below, to immediately withdraw funds from your account.

There is a monthly administrative pre-tax fee of \$3.95 for HCSA, DCAP, or both programs combined.

Convenient SmartFlex Card Option

Pay for eligible HCSA and DCAP expenses immediately with a convenient SmartFlex card. If you elect the SmartFlex card, you won't need to submit claim paperwork and receipts for reimbursement. (However, keep your receipts on file for tax purposes.) The SmartFlex card works like a credit card – you will not enter a PIN – simply sign the receipt and your transaction will be paid out of your HCSA or DCAP account. The SmartFlex card fee is \$18.00 for the year, which is deducted from your election amount. Additional cards for family members are \$5.00 each.

Use or Lose Provision with New Grace Period

Estimate your annual election amount carefully. Internal Revenue Service rules require that any unused funds in a participant's account at plan year-end be forfeited

*Kathy Keefe,
Administrative Assistant
for Unemployment,
Department of
Employment and
Training estimates that
she has saved almost
\$500 over the last two
years by enrolling in the
Health Care Spending
Account Program.*



(e.g., the amount left in your HCSA or DCAP account that you have not submitted receipts for or used up with your SmartFlex card.) However, IRS rules have been recently liberalized to allow a 2½-month grace period. If you have a balance at the end of a calendar year, any claims you submit until March 15 will be deducted from your prior year's balance. In other words, you get an extra six weeks to use it before you lose it.

Chance to Win \$50 for Those Re-Enrolling

Current DCAP or HCSA participants who re-enroll for the 2006 year will automatically be entered into a Sentinel Benefits raffle for one of ten \$50 American Express Gift Certificates. These will be awarded in the spring.

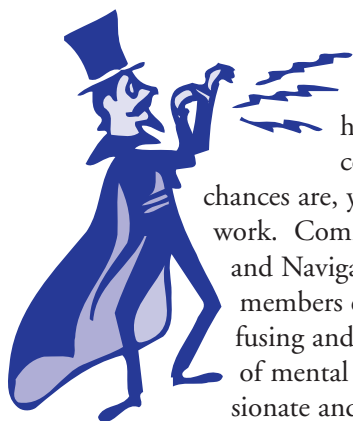
How to Enroll

Return enrollment forms to your agency's Payroll Coordinator no later than Thursday, November 10, 2005. Forms are available through your Payroll Coordinator and on the GIC's website www.mass.gov/gic.

Additional Details

For additional HCSA and DCAP program and SmartFlex card details, see your Payroll Coordinator or the GIC's website or call Sentinel Benefits toll-free at 1-888-762-6088. Also, be sure to attend one of the many mini-fairs at agencies across the state. Fair dates, times and locations will be listed on the HCSA/DCAP posters that will be posted in agencies around the state and on our website www.mass.gov/gic.

UBH's Taverly Sousa Works Magic Behind the Scenes



You may never meet her in person, but if you or your family has dealt with difficult and complex mental health issues, chances are, you know Taverly Sousa's work. Commonwealth Indemnity Plan and Navigator by Tufts Health Plan members entering the sometimes confusing and emotionally draining world of mental health care need a compassionate and knowledgeable advocate to help them on the road to recovery. Taverly Sousa, United Behavioral Health's Local Intensive Case Manager, quietly and effectively makes this happen.

Bipolar disorder and psychosis, cancer, coronary artery disease, eating disorders, or AIDS and depression, chronic pain and addiction, elderly patients unable to live alone who are doing so - - families with these burdens need help navigating care and their benefits. Ms. Sousa identifies and helps solve the following types of issues:

- ◆ Is a meeting needed to discuss inpatient or post hospitalization care – if the member is leaving the hospital, where will he/she go — is the location appropriate and is it covered? If it's not covered, what are the best alternatives and are they available?

- ◆ What outpatient care appointments are needed for the member and his/her family — do transportation arrangements or hours of operation need to be considered?
- ◆ What drugs was the member prescribed — are they appropriate and on the health plan's formulary to ensure affordability and compliance?
- ◆ Does the member understand all aspects of his/her treatment plan?
- ◆ Is the member in need of other state agency services? How can the member access them?

Ms. Sousa coordinates these services and more. With over 20 years' experience, she has served private and public sector populations. A Licensed Independent Clinical Social Worker (LICSW), Ms. Sousa has developed and managed provider networks and worked with a variety of hospitals and state agencies. As a result, she knows many Massachusetts mental health providers well and is knowledgeable about UBH benefits and other available resources.

Easing Worries

Commonwealth Indemnity Plan and Navigator by Tufts Health Plan members can take comfort in knowing that if they ever have to face difficult and complex mental health issues, they have an advocate to help them maximize their benefits to get the care they need.



The Boston Globe Editorial of July 25, 2005

The Boston Globe's editorial board recognized the GIC's efforts to provide quality health insurance and other benefits at a reasonable cost to more than 250,000 state workers, dependents and retirees. The GIC was cited as a model for municipal governments in its work to provide excellent, affordable health coverage.

The editorial stated, "Municipal managers and union leaders need look no further than state government, where workers enjoy excellent, affordable health coverage. The annual increase in the cost of providing health coverage to state workers is about half that for municipal workers...The Commission can be counted on to press private health plans for the best service for state workers. It takes measures, such as adjusting workers' co-payments, to protect taxpayers. The Commission could be a model for local communities."

For a complete copy of the editorial, see www.boston.com/globe.

Minimizing Cancer's Oral Complications



Oral health complications are common in cancer patients. Almost all patients receiving head and neck radiation are affected. Additionally, about 75% of blood and bone marrow transplant recipients and

40% of patients receiving chemotherapy experience them during therapy or after cancer treatment ends. Side effects can include:

- ◆ Mucositis (inflammation of the mucous membranes in the mouth)
- ◆ Mouth Infections (which can spread throughout the body through the bloodstream)
- ◆ Changes in children's dental growth and development
- ◆ Malnutrition and dehydration (caused by inability to eat and drink)
- ◆ Tooth decay and gum disease
- ◆ Taste changes
- ◆ Dry mouth

To mitigate these complications, it is important for cancer patients to work with their oncologist and dentist to develop an oral care plan. Ideally, patients should schedule an oral evaluation with their dentist before cancer treatment begins to reduce and limit severe oral complications, identify and treat existing infections, and develop an individualized oral hygiene plan. Your dentist can work with you to prevent, detect and care for complications during your cancer treatment. He or she can provide topical anesthetics or analgesics as appropriate for oral pain. Patients are advised to:

- ◆ Gently brush teeth, gums and tongue with an extra soft toothbrush and fluoride toothpaste, softening the bristles in warm water first
- ◆ Avoid mouthwashes containing alcohol
- ◆ Use fluoride gel as instructed
- ◆ Rinse the mouth several times a day with a rinse prescribed by your physician or dentist; if you have not been prescribed a rinse, a baking soda and salt solution is a helpful alternative (1 cup warm water, 1/4 teaspoon baking soda and 1/8 teaspoon salt)
- ◆ Avoid sugar-laden candy, gum and soda; avoid tobacco products, alcohol, and spicy or acidic foods

Radiation and chemotherapy frequently cause dry mouth, which can make it difficult to taste, chew, swallow, and speak. Without enough saliva, you can develop tooth decay or other infections in the mouth. To treat dry mouth, sip water frequently, suck ice chips or sugar-free candy, chew sugar-free gum, and, if recommended by your dentist, use a saliva substitute spray or gel or a prescribed saliva stimulant.

For additional information about oral complications of cancer and its treatment, and ways to guard against these complications, visit the National Cancer Institute's website at www.cancer.gov/cancertopics. Members of the Commonwealth Indemnity Plan undergoing cancer treatment will receive oral care recommendations and educational materials by mail in a pilot program sponsored by the GIC and the Massachusetts Employees Fund in cooperation with Delta Dental of Massachusetts and UniCare.

... Tips for Avoiding Carbon Monoxide Poisoning

Carbon Monoxide (CO) is an odorless, colorless gas that can leak from faulty or improperly vented furnaces, automobiles, space and water heaters, fireplaces, and clothes dryers. It can kill without warning. To guard against poisoning, take the following precautions:

- ◆ Install a Carbon Monoxide detector in your home
- ◆ Clean flues and chimneys regularly
- ◆ Avoid flue blockage from leaves or animal nests by installing a ventilated screen cap at the top of your chimney
- ◆ After snow and ice storms, check vents for blockage
- ◆ Never leave a car running in the garage
- ◆ Turn off space heaters and put out the fire in the fireplace and wood stove before you go to bed

Carbon Monoxide poisoning symptoms are similar to the flu, including headaches, dizziness, weakness, nausea, vomiting, sleepiness, confusion and ringing in the ear. If you suspect Carbon Monoxide poisoning, evacuate everyone immediately to fresh air and then call your local fire department and the Poison Control Center (1-800-222-1222). Get the faulty source fixed before reentering your home.



Talking To Your Child About Alcohol and Drugs Is an Ongoing Dialogue



Teens are confronted with many risky temptations that may have far-reaching effects on their future and their health. Every child — including yours — is at risk for substance abuse as early as middle school. More than 25% of Massachusetts 8th graders have reported using alcohol and nearly 12% have used marijuana. According to Massachusetts Department of Public Health publications:

- ◆ A person who starts drinking before age 15 is four times more likely to develop alcoholism than someone who delays drinking until age 21; the longer you can postpone the age of first use, the safer your child is likely to be.
- ◆ Marijuana is more potent than it was even ten years ago; marijuana use can lead to serious mental, emotional and social issues.
- ◆ Heroin can kill even after one use and it is extremely addictive; in 2003 there were over 36,000 admissions into heroin treatment programs in Massachusetts.
- ◆ Inhalants can cause permanent brain damage or death, even on the first use.
- ◆ In 2003, 28 percent of Massachusetts teens said they had ridden in a car within the past month with a driver who had been drinking.
- ◆ Teens who drink have higher rates of fighting, riding with a drunk driver, carrying a weapon, attempting suicide, engaging in risky sexual behavior, using other illegal drugs, and being victims of sexual assault.

Although communicating with teens is often challenging, ongoing communication with your teen can make a difference in preventing substance abuse. Research has shown that teens who learn anti-drug messages at home are 42% less likely to use drugs, and 33% of teens who do not use drugs say the reason they do not is concern about losing their parents' respect and pride. Talking about alcohol and drug issues cannot guarantee that your teenager won't make a mistake, but through talking with your teenager often and thoughtfully, you are providing guidance for making responsible decisions:

- ◆ When talking with and listening to your teen, do so without judging.
- ◆ Discuss the physical effects and potential legal consequences of using drugs and alcohol.
- ◆ Set clear limits and know where your child is and whom he/she is with; follow through with consequences if your

teenager doesn't abide by the rules.

- ◆ Stay involved with your child's life and spend time alone with your child.
- ◆ Be a role model, not using illegal drugs and never drinking and driving; if you drink, do so in moderation.
- ◆ Encourage your child to spend several hours a week on a combination of community service, sports, art, music, drama and/or clubs.
- ◆ Be involved in your child's academics, attending school events and letting your child know you value education.
- ◆ Develop family expectations and rules that indicate that it is not okay for children to drink, use inhalants, or drugs. Share your reasons for making these rules, and the consequences for breaking them. Make it your family's policy for your teen to call you for a ride, no matter what time of day or night, if a driver has been drinking or using drugs.

Despite your best efforts, your teen may develop a substance abuse problem. If your child exhibits warning signs, such as slurred speech, change in appearance of eye pupils, sudden weight gain or loss, sudden psychological changes like aggressiveness, hostility and lying, or social changes such as a drop in school attendance and grades, or you find drug paraphernalia, seek help. Contact United Behavioral Health (Commonwealth Indemnity and Navigator by Tufts Health Plan members) or your health plan for assistance. See page 7 for contact information.

The Massachusetts Department of Public Health provides free materials that provide suggestions for talking with your teen about alcohol and drugs. Their "Be the First to Talk to Your Pre-Teen about Alcohol, Tobacco and Other Drugs" brochure can help you get started with discussing these topics. Listings of additional community resources are included. Their teen-appropriate materials provide information on the legal consequences of substance abuse as well as physical consequences of inhalant abuse. Download these publications at the DPH Bureau of Substance Abuse website: www.mass.gov/dph/bsas/pubs.htm, or to order these materials, contact the Massachusetts Health Promotion Clearinghouse 1-800-952-6637.

Q) I am the former spouse or legally separated spouse of a Commonwealth employee/retiree who has died and was covered under his/her GIC health coverage. Am I eligible to continue GIC health coverage?

A) GIC health coverage for an employee's /retiree's former spouse or legally separated spouse ends when the employee/retiree dies. Former spouses and legally separated spouses are not eligible for survivor health coverage, but may apply for continuing coverage through COBRA or non-group conversion.

Q) I am an active state employee age 65 or over; which health plan card should I present at a doctor's office or hospital?

A) When visiting a hospital or doctor, present your GIC health plan card to ensure your GIC plan is charged for the visit. If you are still working and are age 65 or over, your GIC health plan is your primary health insurance provider; Medicare (if you have it) is secondary.

Q) I am a state employee who is still working, but I am age 65 or older. Should I enroll in Part A and Part B Medicare?

A) If you continue working when you turn age 65, you should enroll in Medicare Part A if you are eligible. Do not enroll in Medicare Part B until you retire from state service.

Q) My student-dependent is turning 24; what happens to his/her health coverage?

A) Your dependent can continue health coverage provided he/she is still attending school full time. You must re-certify student status annually and pay 100% of the premium.

Q) I am a surviving spouse who was covered through my spouse's GIC health insurance coverage. When does my survivor coverage end?

A) Survivor health insurance coverage ends when you stop premium payments, remarry, or die, whichever occurs first.

Q) I am enrolled under the COBRA provision. How do I cancel my coverage?

A) Send a letter to the GIC requesting that your coverage be terminated. Include your name, address, and GIC ID number (usually your Social Security Number). Coverage will be terminated at the end of the month in which your COBRA premium is paid.

Q) How do I change my address?

A) Active employees should advise their GIC Coordinator by completing and returning the GIC Insurance Enrollment and Change Form – Form-1. Retirees must send a letter or this completed form to the GIC. Be sure to include your name, GIC Identification Number (usually your Social Security Number), telephone number, date and signature.

For additional answers to common GIC benefit questions, and for GIC forms, see the "Your GIC Records" section of our website: www.mass.gov/gic.

Letters to the Editor

"I would like to thank the GIC and my Commonwealth Indemnity Plan along with [the Express] Scripts Drug Program for all their wonderful support during my pre-lung-transplant days and now my post-transplant days. It is so wonderful to have the assurance that you have the best health insurance package in the country. From the moment of my diagnosis through the listing process for the lung transplant and now through the post-transplant period, every staff member that I spoke with was very supportive, informative and helpful. I was assigned a Case Manager to be sure that all my services were handled in an expeditious manner and all supplies were made available immediately. The [Express] Scripts Drug Program has been a lifesaver. Lung transplant drugs are very expensive and would be prohibitive if I didn't have this wonderful plan. One of the drugs that have been prescribed would cost me over \$3,000

per month and I only pay \$40 for a 90-day supply. Without these drugs my body would reject my new lung and I would die. I truly believe that my health insurance program has saved my life in more ways than one; I am one lucky person."

D. Wenner, Saugus, MA

The GIC welcomes your feedback. We will include selected letters in our newsletter. Or, submit a letter and request that we not reprint it. The GIC reserves the right to edit your comments for clarity and space considerations. All letters must be signed with your name and address. Send Letters to the Editor to Cynthia McGrath, Editor, *For Your Benefit*, Group Insurance Commission, PO Box 8747, Boston, MA 02114-8747.



Commonwealth Indemnity Plan's Advance Care Planning Pilot Update

The Commonwealth Indemnity Plan's Advance Care Planning pilot program should help many members, based on early returns from the first mailing. Within the first two weeks of the initial mailing, over 6,000 state retirees completed and returned the survey, one-fifth of whom indicated their interest in attending a session in Massachusetts designed to educate and assist members in preparing advance directive documents. As reported in the summer issue of *For Your Benefit*, Commonwealth Indemnity Plan members age 65 and over will be mailed instructional materials this September. Massachusetts members who get this mailing will also receive advance directive forms and details about the sessions.

Next Year's Annual Enrollment Update

The GIC and our health plans continue to refine our Clinical Performance Improvement Initiative for next year's annual enrollment. Because medical providers — doctors, hospitals and other care givers — vary widely in their use of medical resources and overall quality of care, we and our plans are assessing and rating providers' quality and cost effectiveness. We plan to provide this information to you, along with additional co-pay and deductible incentives, to help you choose quality, cost-effective providers.

As you may recall, some of our health plans, known as "Select & Save Plans", introduced these financial incentives for using certain cost-effective and quality hospitals. As of FY07, nearly all of our non-Medicare health plans will be Select and Save Plans, and will include financial incentives for using cost-effective quality doctors as well as hospitals.

Benefit Access

Health Insurance

Commonwealth Indemnity Plan, Commonwealth Indemnity Plan PLUS, Commonwealth Indemnity Community Choice Plan, Indemnity Medicare Extension (OME) Plan (<i>UNICARE</i>)	1-800-442-9300 www.unicare-cip.com
Commonwealth Indemnity Plans' Prescription Drugs (<i>Express Scripts</i>)	1-877-828-9744 www.express-scripts.com
Commonwealth Indemnity Plans and Navigator by Tufts Health Plan Mental Health, Substance Abuse, EAP (<i>United Behavioral Health</i>)	1-888-610-9039 www.liveandworkwell.com (access code: 10910)
Navigator by Tufts Health Plan	1-800-870-9488 www.tuftshealthplan.com/gic
Fallon Community Health Plan Direct Care, Select Care Senior Plan	1-800-868-5200 www.fchp.org
Harvard Pilgrim Health Care POS First Seniority	1-800-333-4742 1-800-421-3550 www.harvardpilgrim.org
Health New England HMO, MedRate	1-800-310-2835 www.healthnewengland.com
Neighborhood Health Plan	1-800-462-5449 www.nhp.org
Tufts Health Plan Medicare Complement	1-800-870-9488
Tufts Health Plan Medicare Preferred (formerly <i>Secure Horizons</i>)	1-800-867-2000 www.tuftshealthplan.com

Other Benefits

Life Insurance and AD&D (<i>UnumProvident</i>)	Call the GIC 1-617-727-2310, ext. 1 www.mass.gov/gic
Long Term Disability (LTD) (<i>The Hartford</i>)	1-866-847-6343 www.maemployeestld.com
Employee Assistance Program (EAP) Accessed by Managers and Supervisors (<i>United Behavioral Health</i>)	1-617-558-3412 www.liveandworkwell.com (access code: 10910)
Health Care Spending Account (HCSA) and Dependent Care Assistance Program (DCAP) (<i>Sentinel Benefits</i>)	1-888-762-6088 www.mass.gov/gic
LifeBalance®	1-800-854-1446 www.lifebalance.net (password and ID: lifebalance)
GIC Retiree Vision Discount Plan (<i>Davis Vision</i>)	1-800-783-3594 www.davisvision.com
GIC Retiree Dental Plan (<i>Altus</i>)	1-800-722-1148 www.altusdental.com
Dental Benefits for Managers, Legislators, Legislative Staff and Executive Office Staff (<i>Delta Dental</i>)	1-800-553-6277 www.deltamass.com
Vision Benefits for Managers, Legislators, Legislative Staff and Executive Office Staff (<i>Davis Vision</i>)	1-800-650-2466 www.davisvision.com
Medicare (Federal Program)	1-800-633-4227 www.medicare.gov
State Board of Retirement	1-617-367-7770 www.mass.gov/treasury/srb.htm
Group Insurance Commission	1-617-727-2310 www.mass.gov/gic
TDD/TTY Access	1-617-227-8583

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GROUP INSURANCE COMMISSION

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Cynthia McGrath, Editor

Medicare Part D and Your Prescription Drug Benefits

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**MEDICARE
PART D
Coverage
begins
January 1,
2006**

Most GIC retirees should not sign up for the new Part D coverage as they already have more comprehensive and less costly prescription drug coverage through their existing GIC health plan.

However, some retirees, such as those who are eligible for both Medicare and Medicaid, and other people with few assets and low-incomes, may benefit by also enrolling in a Medicare Part D plan. To find out whether or not you qualify for subsidized drug coverage, contact the Centers for Medicare & Medicaid (CMS) (1-800-243-4636 for Massachusetts residents, 1-800-633-4227 nationally) and complete and return their "Application for Help With Medicare Prescription Drug Coverage." CMS has mailed this form to many Medicare beneficiaries and it is also available on its website: www.cms.hhs.gov/medicarereform/pdbma.

We will be sending additional information to all of our Medicare enrollees as we know more details.



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COMMONWEALTH OF MASSACHUSETTS

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